

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>		Attorney Docket No.	019934-001710US
		First Inventor	Schall, Thomas J
(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))		Title	IMMUNOLOGIC ACTIVITIES OF RHESUS CYTOMEGALOVIRUS ENCODED IL-10 AND HUMAN CYTOMEGALOVIRUS ENCODED IL-10
		Express Mail Label No.	EL387639415US

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning design patent application contents.		<b>ADDRESS TO</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification (Total Pages <u>57</u> ) (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C.113) (Total Sheets <u>14</u> ) 5. Oath or Declaration (Total Pages <u>    </u> ) a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for a continuation/divisional with Box 18 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper number of pages c. <input type="checkbox"/> Statements verifying identity of above copies <b>ACCOMPANYING APPLICATIONS PARTS</b> 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent 17. <input type="checkbox"/> Other:	
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: ____ / ____ Prior application information: Examiner ____ Group Art Unit: ____ <b>For CONTINUATION or DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
<b>19. CORRESPONDENCE ADDRESS</b>			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		20350 (Insert Customer No. or Attach bar code label here)	
Name		or <input type="checkbox"/> Correspondence address below	
Address			
City	State	Zip Code	
Country	Telephone	Fax	
Name (Print/Type)	Rosemarie L. Celli	Registration No. (Attorney/Agent)	42,397
Signature	Rosemarie L. Celli	Date	July 30, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.  
 PA 3160302 v1

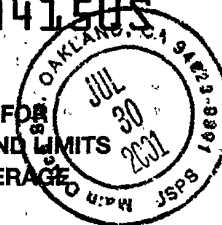


**POST OFFICE  
TO ADDRESSEE**



\*EL387639415US\*

EL387639415US



SEE REVERSE SIDE FOR  
SERVICE GUARANTEE AND LIMITS  
ON INSURANCE COVERAGE

Customer Copy  
Label 11-F July 1997

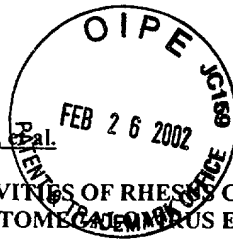
<b>ORIGIN (POSTAL USE ONLY)</b>		
PO ZIP Code 94623	Day of Delivery <input type="checkbox"/> Next <input checked="" type="checkbox"/> Second	Flat Rate Envelope <input type="checkbox"/>
Date In 7-30-01 Mo. Day Year	<input checked="" type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	Postage \$ 16.25
Time In 11:25 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee
Weight 12.1 lbs.	Int'l Alpha Country Code	COD Fee Insurance Fee
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Initials 92	Total Postage & Fees \$ 16.25

<b>CUSTOMER USE ONLY</b>	
METHOD OF PAYMENT: Express Mail Corporate Acct. No. X941886	<input type="checkbox"/> <b>WAIVER OF SIGNATURE</b> (Domestic Only): Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.
Federal Agency Acct. No. or Postal Service Acct. No.	NO DELIVERY: <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday <input type="checkbox"/> Other (specify reason for non-delivery) _____

32/  
F02  
T

<b>FROM: (PLEASE PRINT)</b> TOWNSEND & TOWNSEND CREW LLP 379 LYTTON AVE FL 1 PALO ALTO CA 94301-1431 CL: 019934-001710US RIC/wa	<b>TO: (PLEASE PRINT)</b> PHONE ( ) BOX PATENT APPLICATION Commissioner for Patents Washington D.C. 20231
--	---

**PRESS HARD.** You are making 3 copies. **FOR PICKUP OR TRACKING CALL 1-800-222-1811** [www.usps.gov](http://www.usps.gov) **EMS**



APPLICANTS: Thomas J. Schall, et al.

TITLE: IMMUNOLOGIC ACTIVITIES OF RHESUS CYTOMEGALOVIRUS ENCODED IL-10 AND HUMAN CYTOMEGALOVIRUS ENCODED IL-10

Application No.: Unassigned

Filed: July 30, 2001

Kindly stamp the date received to acknowledge receipt of the below-identified documents and return to addressee.

- 1) Utility Transmittal Form (PTO/SB/05) (1 page);
- 2) Fee Transmittal (PTO/SB/17) (1 page, in duplicate);
- 3) Title Page (1 page);
- 4) Specification (49 pages);
- 5) Claims (6 pages);
- 6) Abstract (1 pages);
- 7) Drawings (14 sheets);
- 8) ADS (3 pages); and,
- 9) Return Receipt Postcard.

Date Mailed: July 30, 2001

Via Express Mail Label: EL387639415US

RIC:wca Attorney Docket No.: 019934-001710US PA 3160351 v1

2001 JUL 30 11 23 AM

APPLICANTS: Thomas J. Schall, et al.

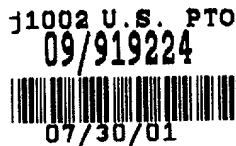
TITLE: IMMUNOLOGIC ACTIVITIES OF RHESUS CYTOMEGALOVIRUS ENCODED IL-10 AND HUMAN CYTOMEGALOVIRUS ENCODED IL-10

Application No.: Unassigned

Filed: July 30, 2001

Kindly stamp the date received to acknowledge receipt of the below-identified documents and return to addressee.

- 1) Utility Transmittal Form (PTO/SB/05) (1 page);
- 2) Fee Transmittal (PTO/SB/17) (1 page, in duplicate);
- 3) Title Page (1 page);
- 4) Specification (49 pages);
- 5) Claims (6 pages);
- 6) Abstract (1 pages);
- 7) Drawings (14 sheets);
- 8) ADS (3 pages); and,
- 9) Return Receipt Postcard.



Date Mailed: July 30, 2001

Via Express Mail Label: EL387639415US

RIC:wca Attorney Docket No.: 019934-001710US PA 3160351 v1

RECEIVED  
MAR 05 2002  
OFFICE OF PETITIONS



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D. C. 20231  
www.uspto.gov

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/919,224	07/30/2001	Thomas J Schall	019934-001710US

20350  
TOWNSEND AND TOWNSEND AND CREW  
TWO EMBARCADERO CENTER  
EIGHTH FLOOR  
SAN FRANCISCO, CA 94111-3834



CONFIRMATION NO. 5559

## FORMALITIES LETTER



\*OC000000006562540\*

Date Mailed: 09/17/2001

## NOTICE OF INCOMPLETE NONPROVISIONAL APPLICATION

## FILED UNDER 37 CFR 1.53(b)

A filing date has NOT been accorded to the above-identified application papers for the reason(s) indicated below.

All of the items noted below and a newly executed oath or declaration covering the items must be submitted within **TWO MONTHS** of the date of this Notice, unless otherwise indicated, or proceedings on the application will be terminated (37 CFR 1.53(e)).

The filing date will be the date of receipt of all items required below, unless otherwise indicated. Any assertions that the item(s) required below were submitted, or are not necessary for a filing date, must be by way of petition directed to the attention of the Office of Petitions accompanied by the \$130.00 petition fee (37 CFR 1.17(h)). If the petition states that the application is entitled to a filing date, a request for a refund of the petition fee may be included in the petition.

- The application was deposited without drawings. 35 U.S.C. 113 (first sentence) requires a drawing "where necessary for the understanding of the subject matter sought to be patented." *Applicant should reconsider whether the drawings are necessary under 35 U.S.C. 113 (first sentence).*

The required items noted below SHOULD be filed along with any items required above. The filing date of this nonprovisional application will be the date of receipt of the items required above.

- The oath or declaration is missing.  
*A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.*

*A copy of this notice **MUST** be returned with the reply.*

Customer Service Center  
Initial Patent Examination Division (703) 308-1202

RECEIVED  
MAR 05 2002  
OFFICE OF PETITIONS

EXHIBIT 1

PART 2 - COPY TO BE RETURNED WITH RESPONSE

20200401 14:00:00